

## PART B - FEE(S) TRANSMITTAL

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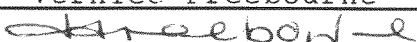
24273 7590 11/15/2006

MOTOROLA, INC  
 INTELLECTUAL PROPERTY SECTION  
 LAW DEPT  
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Vernice Freebourne	(Depositor's name)
	(Signature)
January 8, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/022,269 12/20/2001 Phillip D. Neumiller MESH032 2363

TITLE OF INVENTION: SYSTEM AND METHOD FOR PERFORMING MACRO-DIVERSITY SELECTION AND DISTRIBUTION OF ROUTES FOR ROUTING DATA PACKETS IN AD-HOC NETWORKS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1400 \$0 \$0 \$1400 02/15/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
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JUNTIMA, NITTAYA 2616 370-329000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Randi L. Karpinia

2 Joseph J. Buczynski

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MeshNetworks, Inc.

Maitland, Florida

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
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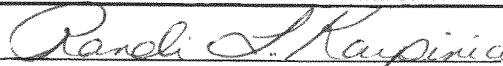
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 502117 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date

January 8, 2007

Typed or printed name

Randi L. Karpinia

Registration No.

46,148

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